

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

The People's Sheriff

ADDRESS (number and street)

5822 Crighton Drive

Check if different
than previously
reported. (ACC)

Dublin

OH

43016

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00576371

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report (Q1)July 15
Quarterly Report (Q2)October 15
Quarterly Report (Q3)January 31
Year-End Report (YE)July 31 Mid-Year
Report (Non-election
Year Only) (MY)Termination Report
(TER)(b) Monthly
Report
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

[]

(d) 30-Day
POST-Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

[]

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Phillips, Robert, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Phillips, Robert, , ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

The People's Sheriff

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
04		01		2016

To:

M M	/	D D	/	Y Y Y Y Y
06		30		2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																		
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colspan="5">2016</td></tr></table>	Y	Y	Y	Y	Y	2016						<table><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><t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This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

The People's Sheriff

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1350.00	1350.00
(ii) Unitemized	4362.00	11387.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	5712.00	12737.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	5712.00	12737.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	5712.00	12737.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	5712.00	12737.00

DETAILED SUMMARY PAGE

of Disbursements

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II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	1200.20	14867.24
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1200.20	14867.24
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	4875.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	4875.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1200.20	19742.24
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1200.20	19742.24

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	5712.00	12737.00
34. Total Contribution Refunds (from Line 28(d))	0.00	4875.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5712.00	7862.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	1200.20	14867.24
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	1200.20	14867.24

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 16

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

The People's Sheriff

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Lilla, Lewis, , ,

Mailing Address 320 Carleton Avenue

City
Central Islip

State
NY

Zip Code
11722

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Retired Detective

Occupation (for Individual)
Bail Guard, Inc.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 13 / 2016

Transaction ID : SA11Al.11604

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Sennett, Dave, , ,

Mailing Address 4841 woodland

City
Western Springs

State
IL

Zip Code
60558

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vp Systems

Occupation (for Individual)
SSI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 16 / 2016

Transaction ID : SA11Al.11631

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Williams, John, , ,

Mailing Address PO Box 1120

City
Somis

State
CA

Zip Code
93066

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Williams Pipeline

Occupation (for Individual)
Pipeline Construction

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 13 / 2016

Transaction ID : SA11Al.11608

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1350.00

1350.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 OF 16

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

The People's Sheriff

Full Name (Last, First, Middle Initial)

A. CardConnectMailing Address 1000 Continental Drive
Suite 600City
King of PrussiaState
PAZip Code
19406Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		04		2016

FEC Identification Number

C**Transaction ID : SB21B.11664**

Amount of Each Disbursement this Period

50.03

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CardConnectMailing Address 1000 Continental Drive
Suite 600City
King of PrussiaState
PAZip Code
19406Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		19		2016

FEC Identification Number

C**Transaction ID : SB21B.11665**

Amount of Each Disbursement this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CardConnectMailing Address 1000 Continental Drive
Suite 600City
King of PrussiaState
PAZip Code
19406Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		03		2016

FEC Identification Number

C**Transaction ID : SB21B.11666**

Amount of Each Disbursement this Period

25.48

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

125.51

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 OF 16

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

The People's Sheriff

Full Name (Last, First, Middle Initial)

A. CardConnect

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2016

Mailing Address 1000 Continental Drive
Suite 600City
King of PrussiaState
PAZip Code
19406Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.11667**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CardConnect

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2016

Mailing Address 1000 Continental Drive
Suite 600City
King of PrussiaState
PAZip Code
19406Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.11668**

Amount of Each Disbursement this Period

49.69

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Henry Alan, LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2016

Mailing Address 5822 Crighton Drive

City
DublinState
OHZip Code
43016Purpose of Disbursement
Accounting and Compliance

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.11946**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1074.69

1200.20

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 9 OF 16

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

The People's Sheriff

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Axiom Strategies, LLC

Nature of Debt (Purpose):
Digital ServicesMailing Address 1251 NW Briarcliff Pkwy
#85City
Kansas CityState
MOZip Code
64116

Outstanding Balance Beginning This Period

4711.69

Transaction ID : SD10.11435

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4711.69

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Axiom Strategies, LLC

Nature of Debt (Purpose):
Fundraising CommissionMailing Address 1251 NW Briarcliff Pkwy
#85City
Kansas CityState
MOZip Code
64116

Outstanding Balance Beginning This Period

503.13

Transaction ID : SD10.11436

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

503.13

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Axiom Strategies, LLC

Nature of Debt (Purpose):
Digital ServicesMailing Address 1251 NW Briarcliff Pkwy
#85City
Kansas CityState
MOZip Code
64116

Outstanding Balance Beginning This Period

2650.00

Transaction ID : SD10.11438

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2650.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

7864.82

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 10 OF 16

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

The People's Sheriff

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Axiom Strategies, LLC

Nature of Debt (Purpose):

Fundraising Commission

Mailing Address 1251 NW Briarcliff Pkwy
#85City
Kansas CityState
MOZip Code
64116

Outstanding Balance Beginning This Period

173.18

Transaction ID : SD10.11439

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

173.18

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Axiom Strategies, LLC

Nature of Debt (Purpose):

Digital Services

Mailing Address 1251 NW Briarcliff Pkwy
#85City
Kansas CityState
MOZip Code
64116

Outstanding Balance Beginning This Period

2650.00

Transaction ID : SD10.11441

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2650.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Axiom Strategies, LLC

Nature of Debt (Purpose):

Fundraising Commission

Mailing Address 1251 NW Briarcliff Pkwy
#85City
Kansas CityState
MOZip Code
64116

Outstanding Balance Beginning This Period

144.45

Transaction ID : SD10.11442

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

144.45

1) **SUBTOTALS** This Period This Page (optional)..... ►

2967.63

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 11 OF 16

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

The People's Sheriff

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Axiom Strategies, LLC

Nature of Debt (Purpose):

Media Monitoring

Mailing Address 1251 NW Briarcliff Pkwy
#85City
Kansas CityState
MOZip Code
64116

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.11964

Amount Incurred This Period

200.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

200.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Axiom Strategies, LLC

Nature of Debt (Purpose):

Digital

Mailing Address 1251 NW Briarcliff Pkwy
#85City
Kansas CityState
MOZip Code
64116

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.11965

Amount Incurred This Period

2809.68

Payment This Period

0.00

Outstanding Balance at Close of This Period

2809.68

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Axiom Strategies, LLC

Nature of Debt (Purpose):

Media Monitoring

Mailing Address 1251 NW Briarcliff Pkwy
#85City
Kansas CityState
MOZip Code
64116

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.11966

Amount Incurred This Period

200.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

200.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

3209.68

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 12 OF 16

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

The People's Sheriff

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Axiom Strategies, LLC

Nature of Debt (Purpose):

Fundraising Commission

Mailing Address 1251 NW Briarcliff Pkwy
#85City
Kansas CityState
MOZip Code
64116

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.11967

Amount Incurred This Period

79.84

Payment This Period

0.00

Outstanding Balance at Close of This Period

79.84

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Axiom Strategies, LLC

Nature of Debt (Purpose):

Digital

Mailing Address 1251 NW Briarcliff Pkwy
#85City
Kansas CityState
MOZip Code
64116

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.11969

Amount Incurred This Period

2731.30

Payment This Period

0.00

Outstanding Balance at Close of This Period

2731.30

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Axiom Strategies, LLC

Nature of Debt (Purpose):

Media Monitoring

Mailing Address 1251 NW Briarcliff Pkwy
#85City
Kansas CityState
MOZip Code
64116

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.11970

Amount Incurred This Period

200.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

200.00

1) SUBTOTALS This Period This Page (optional)..... ►

3011.14

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 13 OF 16

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

The People's Sheriff

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Axiom Strategies, LLC

Nature of Debt (Purpose):

Fundraising Commission

Mailing Address 1251 NW Briarcliff Pkwy
#85City
Kansas CityState
MOZip Code
64116

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.11971

Amount Incurred This Period

157.18

Payment This Period

0.00

Outstanding Balance at Close of This Period

157.18

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Axiom Strategies, LLC

Nature of Debt (Purpose):

Digital Services

Mailing Address 1251 NW Briarcliff Pkwy
#85City
Kansas CityState
MOZip Code
64116

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.11673

Amount Incurred This Period

2650.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2650.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Axiom Strategies, LLC

Nature of Debt (Purpose):

Fundraising Commission

Mailing Address 1251 NW Briarcliff Pkwy
#85City
Kansas CityState
MOZip Code
64116

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.11674

Amount Incurred This Period

156.23

Payment This Period

0.00

Outstanding Balance at Close of This Period

156.23

1) **SUBTOTALS** This Period This Page (optional)..... ►

2963.41

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 14 OF 16

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

The People's Sheriff

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Candidate Command

Nature of Debt (Purpose):
Email CampaignMailing Address 1420 NW Vivion Road
Suite 113City
Kansas CityState
MOZip Code
64118

Outstanding Balance Beginning This Period

18453.68

Transaction ID : SD10.11431

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

18453.68

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Candidate Command

Nature of Debt (Purpose):
Digital ServicesMailing Address 1420 NW Vivion Road
Suite 113City
Kansas CityState
MOZip Code
64118

Outstanding Balance Beginning This Period

5201.66

Transaction ID : SD10.11433

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5201.66

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Henry Alan, LLC

Nature of Debt (Purpose):
Compliance and Accounting

Mailing Address 5822 Crighton Drive

City
DublinState
OHZip Code
43016

Outstanding Balance Beginning This Period

1250.00

Transaction ID : SD10.11437

Amount Incurred This Period

0.00

Payment This Period

1000.00

Outstanding Balance at Close of This Period

250.00

1) SUBTOTALS This Period This Page (optional)..... ►

23905.34

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 15 OF 16

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

The People's Sheriff

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Henry Alan, LLC

Nature of Debt (Purpose):

Compliance and Accounting

Mailing Address 5822 Crighton Drive

City

Dublin

State

OH

Zip Code

43016

Outstanding Balance Beginning This Period

1250.00

Transaction ID : SD10.11440

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1250.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Henry Alan, LLC

Nature of Debt (Purpose):

Accounting and Compliance

Mailing Address 5822 Crighton Drive

City

Dublin

State

OH

Zip Code

43016

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.11963

Amount Incurred This Period

1000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Henry Alan, LLC

Nature of Debt (Purpose):

Accounting and Compliance

Mailing Address 5822 Crighton Drive

City

Dublin

State

OH

Zip Code

43016

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.11968

Amount Incurred This Period

500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

500.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

2750.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 16 OF 16

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

The People's Sheriff

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Henry Alan, LLC

Nature of Debt (Purpose):

Accounting and Compliance

Mailing Address 5822 Crighton Drive

City
DublinState
OHZip Code
43016

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.11972

Amount Incurred This Period

500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

500.00

2) **TOTALS** This Period (last page this line number only)..... ►

47172.02

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

47172.02